PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 106999 5/

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			46		-		-	RATE	FEE	1	RATE	FEE
FC)R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			46 minus 20=		*			X\$ 9=		OR	X\$18=	468.00
INDEPENDENT CLAIMS			2 minus 3 =		* <i>P</i>			X43=		OR	X86=	
ΜL	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=	, , , , , , , , , , , , , , , , , , ,
* If the difference in column 1 is less than zero, e					"0" in c	column 2		TOTAL		OR	TOTAL	1238
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1)				(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=] [X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ال	+145=		OR	+290=	
								TOTAL			TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Colu												
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┚╽	+145=	-	OR	+290=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	e.
	Independent	*	Minus	***		=]	X43=		OR	X86=	
[FIRST PRESE	JLTIPLE DEF	PENDENT	CLAIM		┚┞			UH			
٠	f the entry in colum	ma 1 ia laan thaa 1	o ontre in anti-	mn 0	"O" in ac	lumo 2		+145=	0	OR	+290=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE											
		iber Previously Pai					er fou	nd in the app	ropriate box	in col	umn 1.	